

**DECLARATION AND POWER OF ATTORNEY FOR
UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing ☒ Declaration Submitted after Initial Filing

Attorney Docket No.	1194-199
First Named Inventor	Peter Gelslioh
COMPLETE IF KNOWN	
Application Number	09/988,805
Filing Date	November 20, 2001
Group Art Unit	1617
Examiner Name	Unassigned

As a below named inventor, I hereby declare that

My residence, mailing address, and citizenship are as stated below next to name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **RESORBABLE EXTRACELLULAR MATRIX FOR RECONSTRUCTION OF CARTILAGE**, the specification of which is was filed on November 20, 2001 as United States Application Number 09/988,805 and was amended on ____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9503492.2	UK	02/22/1995	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

I or we hereby appoint the registered practitioner(s) associated with Customer No. 6449 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number 6449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and lies like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Peter		Family Name or Surname GEISTLICH	
Inventor's Signature <i>P. Geistlich</i>		Date January 23, 2002	
Residence: City CH-6362 Stansstad	State	Country Switzerland	Citizenship Switzerland
Mailing Address Kehrsitenstrasse 19, CH-6362 Stansstad, Switzerland			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Lothar		Family Name or Surname SCHLOESSER	
Inventor's Signature <i>L. Schloesser</i>		Date January 23, 2002	
Residence: City D-64297 Darmstadt	State	Country Fed. Rep. Of Germany	Citizenship Germany
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			